

Practitioner's Docket No. U013043-1

PATENT

Optional Customer No. Bar Code



00140

PATENT TRADEMARK OFFICE

COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,
CONTINUATION, OR C-I-P)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type:

(check one applicable item below)

- ☐ original.
☐ design.

NOTE: With the exception of a supplemental oath or declaration submitted in a reissue, a supplemental oath or declaration is not treated as an amendment under 37 CFR 1.312 (Amendments after allowance), M.P.E.P. Section 714.16, 7th Ed.

- ☐ supplemental.

NOTE: If the declaration is for an International Application being filed as a divisional, continuation or continuation-in-part application, do not check next item; check appropriate one of last three items.

- ☒ national stage of PCT.

NOTE: If one of the following 3 items apply, then complete and also attach **ADDED PAGES FOR DIVISIONAL, CONTINUATION OR C-I-P**.

NOTE: See 37 C.F.R. Section 1.63(d) (continued prosecution application) for use of a prior nonprovisional application declaration in the continuation or divisional application being filed on behalf of the same or fewer of the inventors named in the prior application.

- ☐ divisional.
☐ continuation.

NOTE: Where an application discloses and claims subject matter not disclosed in the prior application, or a continuation or divisional application names an inventor not named in the prior application, a continuation-in-part application must be filed under 37 C.F.R. Section 1.53(b) (application filing requirements-nonprovisional application).

- ☐ continuation-in-part (C-I-P).

INVENTORSHIP IDENTIFICATION

WARNING: *If the inventors are each not the inventors of all the claims, an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.*

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

A MOUTHGUARD

SPECIFICATION IDENTIFICATION

The specification of which:

(complete (a), (b), or (c))

(a) ☐ is attached hereto.

NOTE: *The following combinations of information supplied in an oath or declaration filed on the application filing date with a specification are acceptable as minimums for identifying a specification and compliance with any one of the items below will be accepted as complying with the identification requirement of 37 C.F.R. Section 1.63:*

"(1) name of inventor(s), and reference to an attached specification which is both attached to the oath or declaration at the time of execution and submitted with the oath or declaration on filing;

"(2) name of inventor(s), and attorney docket number which was on the specification as filed; or

"(3) name of inventor(s), and title which was on the specification as filed."

Notice of July 13, 1995 (1177 O.G. 60).

(b) ☒ was filed on December 7, 2000, ☒ as Application No. 09/719,058
☐ and was amended on _____ (if applicable)

NOTE: *Amendments filed after the original papers are deposited with the PTO that contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 C.F.R. Section 1.67.*

NOTE: *The following combinations of information supplied in an oath or declaration filed after the filing date are acceptable as minimums for identifying a specification and compliance with any one of the items below will be accepted as complying with the identification requirement of 37 C.F.R. Section 1.63:*

(A) application number (consisting of the series code and the serial number, e.g., 08/123,456);

(B) serial number and filing date;

(C) attorney docket number which was on the specification as filed;

(D) title which was on the specification as filed and reference to an attached specification which is both attached to the oath or declaration at the time of execution and submitted with the oath or declaration; or

(E) title which was on the specification as filed and accompanied by a cover letter accurately identifying the application for which it was intended by either the application number (consisting of the series code and the serial number, e.g., 08/123,456), or serial number and filing date. Absent any statement(s) to the contrary, it will be presumed that the application filed in the PTO is the application which the inventor(s) executed by signing the oath or declaration.

M.P.E.P. Section 601.01(a), 7th ed.

- (c) ☒ was described and claimed in PCT International Application No. AU99/00458 filed on June 11, 1999 and as amended under PCT Article 19 on _____ (if any).

SUPPLEMENTAL DECLARATION (37 C.F.R. Section 1.67(b))

(complete the following where a supplemental declaration is being submitted)

☐ I hereby declare that the subject matter of the

☐ attached amendment

☐ amendment filed on _____.

was part of my/our invention and was invented before the filing date of the original application, above identified, for such invention.

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, Section 1.56,

(also check the following items, if desired)

☐ and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, and

☐ in compliance with this duty, there is attached an information disclosure statement, in accordance with 37 C.F.R. Section 1.98.

PRIORITY CLAIM (35 U.S.C. Section 119(a)-(d))

NOTE: "The claim to priority need be in no special form and may be made by the attorney or agent if the foreign application is referred to in the oath or declaration as required by Section 1.63. The claim for priority and the certified copy of the foreign application specified in 35 U.S.C. Section 119(b) must be filed in the case of an interference (Section 1.63(f)), when necessary to overcome the date of a reference relied upon by the examiner, when specifically required by the examiner, and in all other situations, before the patent is granted. If the claim for priority or the certified copy of the foreign application is filed after the date the issue fee is paid, it must be accompanied by a petition requesting entry and by the fee set forth in Section 1.17(i). If the certified copy is not in the English language, a translation need not be filed except in the case of interference; or when necessary to overcome the date of a reference relied upon by the examiner; or when specifically required by the examiner; in which event an English language translation must be filed together with a statement that the translation of the certified copy is accurate." 37 C.F.R. Section 1.55(a).

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(complete (d) or (e))

- (d) ☐ no such applications have been filed.
 (e) ☒ such applications have been filed as follows.

NOTE: Where item (c) is entered above and the International Application which designated the U.S. itself claimed priority check item (e), enter the details below and make the priority claim.

**PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS
 (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION
 AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. SECTION 119(a)-(d)**

COUNTRY (OR INDICATE IF PCT)	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
AU	PP 4098	11 JUNE 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

**CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S)
 (35 U.S.C. Section 119(e))**

I hereby claim the benefit under Title 35, United States Code, Section 119(e) of any United States provisional application(s) listed below:

PROVISIONAL APPLICATION NUMBER

FILING DATE

**CLAIM FOR BENEFIT OF EARLIER U.S./PCT APPLICATION(S)
 UNDER 35 U.S.C. SECTION 120**

- ☐ The claim for the benefit of any such applications are set forth in the attached
**ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY
 FOR DIVISIONAL, CONTINUATION OR CONTINUATION-IN-PART (C-I-P)
 APPLICATION.**

**ALL FOREIGN APPLICATION(S), IF ANY, FILED MORE THAN 12 MONTHS
(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION**

NOTE: If the application filed more than 12 months from the filing date of this application is a PCT filing forming the basis for this application entering the United States as (1) the national stage, or (2) a continuation, divisional, or continuation-in-part, then also complete **ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR C-I-P APPLICATION** for benefit of the prior U.S. or PCT application(s) under 35 U.S.C. Section 120.

POWER OF ATTORNEY

I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

(list name and registration number)

12 JOSEPH H. HANDELMAN, 26179

RICHARD P. BERG, 28145

JOHN RICHARDS, 31033

JULIAN H. COHEN, 20302

RICHARD J. STRETT, 25765

WILLIAM R. EVANS 25858

PETER D. GALLOWAY, 27885

JANET I. CORD, 33778

IAN C. BAILLIE, 24090

CLIFFORD J. MASS, 30086

THOMAS F. PETERSON, 24790

CYNTHIA R. MILLER, 34678

(Check the following item, if applicable)

☐ I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

☐ Attached, as part of this declaration and power of attorney, is the authorization of the above-named practitioner(s) to accept and follow instructions from my representative(s).

NOTE: "Special care should be taken in continuation or divisional applications to ensure that any change of correspondence address in a prior application is reflected in the continuation or divisional application. For example, where a copy of the oath or declaration from the prior application is submitted for a continuation or divisional application filed under 37 CFR 1.53(b) and the copy of the oath or declaration from the prior application designates an old correspondence address, the Office may not recognize, in the continuation or divisional application, the change of correspondence address made during the prosecution of the prior application. Applicant is required to identify the change of correspondence address in the continuation or divisional application to ensure that communications from the Office are mailed to the current correspondence address. 37 CFR 1.63(d)(4)." Section 601.03, M.P.E.P., 7th Ed

SEND CORRESPONDENCE TO

Ladas & Parry
26 West 61st Street
New York, N.Y. 10023

DIRECT TELEPHONE CALLS TO:

*(Name and telephone number)***Peter D. Galloway****(212) 708-1905**

(complete the following if applicable)

Since this filing is a ☐ continuation ☐ divisional there is attached hereto a Change of Correspondence Address so that there will be no question as to where the PTO should direct all correspondence.

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

NOTE: Carefully indicate the family (or last) name, as it should appear on the filing receipt and all other document.

NOTE: Each inventor must be identified by full name, including the family name, and at least one given name without abbreviation together with any other given name or initial, and by his/her residence, post office address and country of citizenship. 37 C.F.R. Section 1.63(a)(3).

NOTE: Inventors may execute separate declarations/oaths provided each declaration/oath sets forth all the inventors. Section 1.63(a)(3) requires that a declaration/oath, inter alia, identify each inventor and prohibits the execution of separate declarations/oaths which each sets forth only the name of the executing inventor. 62 Fed. Reg. 53,131, 53,142, October 10, 1997.

Full name of sole or first inventor

1-10 Peter
(Given Name)

(Middle Initial or Name)

Burns
Family (Or Last Name)

Inventor's signature (x)

Date (x)

26/1/01

Country of Citizenship

Australian

Residence

Level 1, 9 Charlotte Street, Artarmon New South Wales 2064, Australia

Post Office Address

Save as above

Full name of second joint inventor, if any

(Given Name)

(Middle Initial or Name)

Family (Or Last Name)

Inventor's signature

Date

Country of Citizenship

Residence

Post Office Address

Full name of third joint inventor, if any

(Given Name)

(Middle Initial or Name)

Family (Or Last Name)

Inventor's signature

Date

Country of Citizenship

Residence

Post Office Address

*(check proper box(es) for any of the following added page(s)
that form a part of this declaration)*

- ☐ Signature for fourth and subsequent joint inventors. Number of pages added _____

* * *

- ☐ Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added _____

* * *

- ☐ Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 C.F.R. Section 1.47. Number of pages added _____

* * *

- ☐ Added page for signature by one joint inventor on behalf of deceased inventor(s) where legal representative cannot be appointed in time. (37 C.F.R. Section 1.47)

* * *

- ☐ Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (C-I-P) application.

☐ Number of pages added _____

* * *

- ☐ Authorization of practitioner(s) to accept and follow instructions from representative.

*(If no further pages form a part of this Declaration,
then end this Declaration with this page and check the following item)*

☒ This declaration ends with this page.

Practitioner's Docket No. U 013043-1

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

[x] In re application of: Peter BURNS
Application No.: 09/719,058
Filed: December 7, 2000
For: A MOUTHGUARD

Group No.:
Examiner: - -

[] *Patent No.:

Issue Date:

*NOTE: Insert name(s) of inventor(s) and title also for patent. Where statement is with respect to a maintenance fee payment, also insert application number and filing date, and add Box M. Fee to address.

STATEMENT CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(c-f) and 1.27(b-d))

With respect to the invention described in

[] the specification filed herewith.

[x] application no. 09/719,058, filed December 7, 2000.

[] patent no. _____ issued _____.

I. IDENTIFICATION AND RIGHTS AS A SMALL ENTITY

I hereby state that I am

(complete either (a), (b), (c) or (d) below)

(a) Independent Inventor

[] a below named independent inventor, and that I qualify as an independent inventor, as defined in 37 CFR 1.9(c), for purposes of paying reduced fees under Sections 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office.

(b) Noninventor Supporting a Claim by Another

[] making this statement to support a claim by

_____ for a small entity status for purposes of paying reduced fees under Sections 41(a) and (b) of Title 35, United States Code. I hereby state that I would qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under Sections 41(a) and (b) of Title 35, United States Code, if I had made the above identified invention

(c) Small Business Concern

check
one

☒ the owner of the small business concern identified below:

[] an official of the small business concern empowered to act on behalf of the concern identified below:

Name of Concern SIGNATURE MOUTHGUARDS PTY LIMITED
 Address of Concern ACN 056 831 773 OF LEVEL 1, 9 CARLOTTA STREET,
ARTARMON NEW SOUTH WALES 2064, AUSTRALIA and

that the above identified small business concern qualifies as a small business concern, as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under Sections 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

(d) Non-Profit Organization

☐ an official empowered to act on behalf of the nonprofit organization identified below:

Name of Organization _____
 Address of Organization _____

TYPE OF ORGANIZATION

- ☐ University or Other Institution of Higher Education
☐ Tax Exempt Under Internal Revenue Service Code (26 USC 501(a) and 501(c) (3))
☐ Nonprofit Scientific or Educational Under Statute of State of the United States of America
 (Name of State _____)
 (Citation of Statute _____)
☐ Would Qualify as Tax Exempt Under Internal Revenue Service Code (26 USC 501(a) and 501(c) (3)), if Located in the United States of America
☐ Would Qualify as Nonprofit Scientific or Educational Under Statute of State of the United States of America, if Located in the United States of America
 (Name of State _____)
 (Citation of Statute _____)

and that the nonprofit organization identified above qualifies as a nonprofit organization, as defined in 37 CFR 1.9(e), for purposes of paying reduced fees under Sections 41(a) and (b) of Title 35, United States Code.

II OWNERSHIP OF INVENTION BY DECLARANT

I hereby state that rights under contract or law remain with and/or have been conveyed to the above identified

<input type="checkbox"/> person (item (a) or (b) above)	<input checked="" type="checkbox"/> concern (item (c) above)	<input type="checkbox"/> organization (item (d) above)
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EXCEPT, that if the rights held are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held (1) by any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, (2) any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or (3) a nonprofit organization under 37 CFR 1.9(e).

- ☒ no such person, concern, or organization
☐ person, concerns or organizations listed below*

*NOTE: Separate statements are required from each named person, concern or organization having rights to the invention as to their status as small entities (37 CFR 1.27)

Full Name _____
 Address _____
☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

Full Name _____
 Address _____
☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

III. ACKNOWLEDGEMENT OF DUTY TO NOTIFY PTO OF STATUS CHANGE

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

IV. DECLARATION

(check the following item, if desired)

NOTE: The following verification statement need not be made in accordance with the rules published on October 10, 1997, 62 Fed. Reg. 52131, effective December 1, 1997.

NOTE: "The presentation to the Office (whether by signing, filing, submitting, or later advocating) of any paper by a party, whether a practitioner or non-practitioner, constitutes a certification under § 10.18(b) of this chapter. Violations of § 10.18(b)(2) of this chapter by a party, whether a practitioner or non-practitioner, may result in the imposition of sanctions under § 10.18(c) of this chapter. Any practitioner violating § 10.18(b) may also be subject to disciplinary action. See §§ 10.18(d) and 10.23(c)(15)." 37 CFR 1.4(d)(2)

- ☐ I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

V. SIGNATURES*(complete only (e) or (f) below)***(c)****NOTE:** All inventors must sign the statement._____
Name of Inventor_____
Signature of Inventor

Date: _____

Name of Inventor_____
Signature of Inventor

Date: _____

Name of Inventor_____
Signature of Inventor

Date: _____

(add lines for any additional inventors who must sign)

or

(d)**NOTE:** The title of the person signing on behalf of a concern or nonprofit organization should be specified

Name of Person Signing

PETER J. BURNS

Title of Person

OWNER, CHAIRMAN*(if signing on behalf of a concern or non-profit organization)*Address of Person Signing ACN 056 831 773 OF LEVEL 1, 9 CARLOTTA STREET, ARTARMON
NEW SOUTH WALES 2064, AUSTRALIA

SIGNATURE (x)

DATE (x)

26/1/01